

Request for Laboratory Services

Customer Address:				DLS SRN:	
Project Officer:			Request Date (DD-MMM-YYYY):		
TEL:	FAX:		Email:		
Division:	Program:		Installation Site:	ARLOC / WIC:	
Source of Funds:			MIPR No.:		
Project Number:			Sampling Date:	Delivery Date:	
DLS Sampling Kit Required:		Date Kit Required:		Kit Shipped By:	
Analysis Priority Requested:			Justification (see Note 2):		
Note 1: Sample Priorities are associated with Turnaround Time (TAT) goals and not guarantees. TAT is defined as the number of calendar days from sample receipt at the laboratory to the transmittal of data by Electronic Data Deliverable (EDD) courier, FAX, or certified mail. The DLS "in-house" TAT goals are: Routine: 14 days, Immediate: 7 days, and Emergent: 48-96 Hrs. (test dependent). Qualitative Identification of contaminants from samples of unknown origin may require 30 to 90 days or more to complete.					
Note 2: Immediate / Emergent analysis priority requires a written statement documenting the risk that justifies the elevated priority.					
Note 3: This Request for Laboratory Service will be cancelled 60 calendar days after the Projected Delivery Date unless the Project Officer provides a written confirmation of an updated Delivery Date.					
Note 4: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.					
Note 5: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. <i>I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.</i>					
Projected Samples					
Analysis		Matrix	Quantity	Remarks	DLS Use CL
Request lead (Pb) samples be analyzed IAW ELLAP criteria – Note: Pb “Wipes” must meet ASTM E 1792 specifications.				SPACE BELOW PROVIDED FOR ANALYSIS COMMENTS:	
— For Laboratory Use Only —					
Inorganic Analyses				Organic Analyses	
Accept	Reject	Date:	Initials:	Accept	Reject
Comments:				Comments:	
Please contact us. DLS professionals would be delighted to help answer any of your questions and concerns!					
DSN		Commercial		Use our preferred email address to ensure a quick response.	
TEL	314-486-8181 / 7052	+49 (06371) 86-8371 / 6052	Email	usachppmeur.dlshotline@amedd.army.mil	
FAX	314-486-7054 / 8788	+49 (06371) 86-7054 / 8788	Web Site	www.chppmeur.healthcare.hqusareur.army.mil	

Request for Laboratory Analysis: Industrial Hygiene Bulk Sample

Customer Address:			DLS SRN:
Project Officer:		Project No.:	
TEL:	FAX:	Email:	
Installation Site:		ARLOC / WIC:	
Fund Source:		MIPR No.:	
Collection Date:	Time:	Analysis Priority:	
Sample ID:			
Note 1: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.			
Note 2: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. <i>– I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.</i>			

Description of Operation:				
# Persons Exposed:		Hours / Day:		Associated Air Samples Collected:
Associated Complaints:				
Label Information				
Trade Name:		NSN:		Manufacturer:
Address:				MSDS Attached:
Analysis Requested:				
DLS Sample ID	Field ID	Sample Area	Constituents	Remarks
<i>Request lead (Pb) samples be analyzed IAW ELLAP criteria – Note: Pb “Wipes” must meet ASTM E 1792 specifications.</i>				
Comments to the Laboratory:				

— For Laboratory Use Only —		
Date Received:	Received By:	Holding Area:
Laboratory Comments:		

Request for Laboratory Analysis: Industrial Hygiene Air Sample

Customer Address:		DLS SRN:
Project Officer:		Project No.:
TEL:	FAX:	Email:
Installation Site:		ARLOC / WIC:
Fund Source:		MIPR No.:
Collection Date:	Time:	Analysis Priority:
Sample ID:		
Note 1: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.		
Note 2: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. <i>– I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.</i>		

Description of Operation:						
Persons Exposed:		Hours / Day:		Method of Collection:		
Associated Complaints:						
Analysis Requested:						
Criteria	Sampling Data					
Sample No.						
Pump No.						
Time On						
Time Off						
Total Minutes						
Flow Rate (LPM)						
Volume (L)						
GA/BZ						
Employee ID						
DLS Sample ID						
<i>Request lead (Pb) samples be analyzed IAW ELLAP criteria – Note: Pb “Wipes” must meet ASTM E 1792 specifications.</i>						
Comments to the Laboratory:						

— For Laboratory Use Only —		
Date Received:	Received By:	Holding Area:
Laboratory Comments:		

Request of Laboratory Analysis: Bulk Liquid / Ground Water / Wastewater Profile Sheet

Customer Address:		DLS SRN:
Project Officer:		Project No.:
TEL:	FAX:	Email:
Installation Site:		ARLOC / WIC:
Fund Source:		MIPR No.:
Collection Date:	Time:	Analysis Priority:
Sample ID:		
Note 1: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.		
Note 2: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. <i>— I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.</i>		

METALS

Aluminum (Al)
Antimony (Sb)
Arsenic (As)
Barium (Ba)
Beryllium (Be)
Cadmium (Cd)
Calcium (Ca)
Chromium (Cr)
Cobalt (Co)
Copper (Cu)
Iron (Fe)
Lead (Pb)
Magnesium (Mg)
Manganese (Mn)
Mercury (Hg)
Molybdenum (Mo)
Potassium (K)
Nickel (Ni)
Silver (Ag)
Selenium (Se)
Sodium (Na)
Zinc (Zn)
Hardness (calculation)
Langlier Index (Saturation Index)
Field Rec: Temp (°C) pH

NON-METALS

Ammonia	
Total Nitrate / Nitrate (Preserved)	
Cyanide	
Alkalinity	
Conductivity	
pH	
TDS	
Bromide	
Chloride	
Fluoride	
Sulfate	
Please Note: The following analytes have a 48 hour holding time and must be analyzed by the laboratory within 48 hours of their collection.	

Color	
Nitrate	Nitrite
Total Nitrite / Nitrite	
Odor	
ortho-Phosphate	
Turbidity	
Gross Alpha & Beta Activity	

ORGANICS

BTEX	
Carbamates	
CHC	
EDB / DBCP	
Herbicides	
PAH	
PCB	
Pesticides	
TPH (MDL 0.05 mg/L)	
TPH (MDL 0.02 mg/L)	
Please Note: To achieve this MDL you must submit 2 liters of water.	
VOC	
Contract Laboratory Analyses	
Acute Toxicity (<i>Daphnia Magna</i>)	
AOX	
BOD	
Boron (B)	
COD	
Fish Toxicity	
Hydrogen Sulfide	
Kjedahl Nitrogen	
Oxidizability	
Surfactants	
Total Phenols	
Total Phosphorus (P)	

Other Analyses (List Below):

— For Laboratory Use Only —		
Date Received:	Received By:	Holding Area:
Laboratory Comments:		

Request of Laboratory Analysis: Drinking Water Profile Sheet

Customer Address:		DLS SRN:
Project Officer:		Project No.:
TEL:	FAX:	Email:
Installation Site:		ARLOC / WIC:
Fund Source:		MIPR No.:
Collection Date:	Time:	Analysis Priority:
Sample ID:		
Note 1: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.		
Note 2: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. <i>– I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.</i>		

METALS

Aluminum (Al)
Antimony (Sb)
Arsenic (As)
Barium (Ba)
Boron (B)
Beryllium (Be)
Cadmium (Cd)
Calcium (Ca)
Chromium (Cr)
Cobalt (Co)
Copper (Cu)
Iron (Fe)
Lead (Pb)
Magnesium (Mg)
Manganese (Mn)
Mercury (Hg)
Molybdenum (Mo)
Nickel (Ni)
Potassium (K)
Selenium (Se)
Silver (Ag)
Sodium (Na)
Thallium (Tl)
Total Phosphorus (P)
Zinc (Zn)
Hardness (calculation)
Langlier Index
Field Rec: Temp (°C) pH

NON-METALS

Ammonia	
Total Nitrate / Nitrate (Preserved)	
Cyanide	
Alkalinity	
Conductivity	
pH	
TDS	
Bromide	
Chloride	
Fluoride	
Sulfate	
Please Note: The following analytes have a 48 hour holding time and must be analyzed by the laboratory within 48 hours of their collection.	
Color	
Nitrate Nitrite	
Total Nitrite / Nitrite	
Odor	
ortho-Phosphate	
Turbidity	
Gross Alpha & Beta Activity	

ORGANICS

Carbamates
EDB / DBCP
Herbicides
PAH
PCB
Pesticides
TPH (MDL 0.05 mg/L)
TPH (MDL 0.02 mg/L)
Please Note: To achieve this MDL you must submit 2 liters of water.
TTHM
TTHM Potential
VOC

Contract Laboratory Analyses

Asbestos
Adipate & Phthalate
Dalapon
Diquat & Paraquat
Dioxin (TCDD)
Endothall
Glyphosate
Kjedahl Nitrogen
Oxidizability
Surfactants
Radium 226 & 228 Activity

Other Analyses (List Below):

— For Laboratory Use Only —

Date Received:	Received By:	Holding Area:
Laboratory Comments:		

— <i>For Laboratory Use Only</i> —		
Date Received:	Received By:	Holding Area:
Laboratory Comments:		

Chain of Custody

Customer Address:			DLS SRN:		
Project Officer:			Project No.:		
TEL:	FAX:	Email:			
Installation Site:			ARLOC / WIC:		
Fund Source:			MIPR No.:		
Collection Date:		Time:	Analysis Priority:		
Sample ID:					
Note 1: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.					
Note 2: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. <i>– I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.</i>					

Sample ID	Description	Analysis

Shipment Information				Seal Intact	
Packed By:	Date:	Time:			
Shipped By:	Date:	Time:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shipper:	Tracking No.:		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Received By:	Date:	Time:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shipment Receiving Comments:					

Sample Receiving Information					
Sample ID	Received By	Date	Time	DLS ID	Seal Intact
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Transfer of Custody						
DLS ID	Relinquished By	Date	Time	Received By	Date	Time

Disposal Information			
Sample IDs	Disposed By	Date	Time

Request for Laboratory Analysis: Bioassay

Customer Address:				DLS SRN:	
Project Officer:			Project No.:		
TEL:	FAX:		Email:		
Installation Site:			ARLOC / WIC:		
Fund Source:			MIPR No.:		
Collection Date:		Time:	Analysis Priority:		
Sample ID:					
Note 1: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.					
Note 2: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. — I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.					

Name	SSN	DOB	Specimen	Date of Collection	Start Time	End Time

Requesting Medical Provider:		
Address:		
Phone No:	Fax No:	Email:

— For Laboratory Use Only —		
Date Received:	Received By:	Holding Area:
Laboratory Comments:		

Request of Laboratory Analysis: Deployment 40 mL Drinking Water Kit (Screen)

Customer Address:		DLS SRN:
Project Officer:		Project No.:
TEL:	FAX:	Email:
Installation Site:		ARLOC / WIC:
Fund Source:		MIPR No.:
Collection Date:	Time:	Analysis Priority:
Sample ID:		
Note 1: DLS assumes neither responsibility nor liability for the sampling protocols employed by the customer.		
Note 2: Unless noted below, I (the customer) hereby authorize DLS when necessary to sub-contract requested analyses to an accredited Contract Laboratory to meet my requirements. <i>– I do NOT authorize DLS to sub-contract analyses. Please contact me before sending my samples to a contract lab.</i>		

METALS & HARDNESS

125 mL Vial
Aluminum (Al)
Antimony (Sb)
Arsenic (As)
Barium (Ba)
Beryllium (Be)
Cadmium (Cd)
Calcium (Ca)
Chromium (Cr)
Copper (Cu)
Iron (Fe)
Lead (Pb)
Magnesium (Mg)
Manganese (Mn)
Mercury (Hg)
Nickel (Ni)
Silver (Ag)
Selenium (Se)
Thallium (Tl)
Zinc (Zn)
Hardness (Calculated - Ca & Mg)
Other Metals
Sodium (Na)

NON-METALS

1 – 40 mL Vial
Ammonia
1 – 40 mL Vial
Cyanide
1 – 125 mL Vial
Alkalinity
Conductivity
pH
TDS
1 – 40 mL Vial
Total Nitrate/Nitrite (Preserved Vial)
1 – 40 mL Vial
Color, Apparent
Turbidity
1 – 40 mL Vial
Chloride
Fluoride
Sulfate

NON-METALS

1 – 125 mL Vial
Gross Alpha & Beta Activity
ORGANICS
3 – 40 mL Vials
VOC (Includes TTHM)
2 – 40 mL Vials
VOC BLANK
2 – 40 mL Vials
EDB / DBCP
2 – 40 mL Vials
Pesticides (includes Lindane and Heptachlor)
1 – 40 mL Vial
SVOC BLANK
1 – 125 mL Vial
PAH
2 – 40 mL Vials
Herbicides
1 – 40 mL Vial
Carbamates

Notes

For

LAB:

— For Laboratory Use Only —

Date Received:	Received By:	Holding Area:
Laboratory Comments:		